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FACSIMILE COVER SHEET

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TO:	RE:
Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application No. 10/530,504 Filing Date: April 6, 2005
TELEPHONE:	FACSIMILE:
(571) 272-3766 Examiner: Carlos Ortiz-Rodriguez	(571) 273-8300 ·

MESSAGE

The following documents are submitted with this Cover Sheet:

Request for Continued Examination (RCE) Transmittal Amendment Pursuant to 37 C.F.R. §1.114 Transmittal Sheet

CONFIDENTIALITY NOTE:

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GARY M. COHEN, ESQ. SEP 2 8 2010

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Attorney's Reference: CIRTESS. D16

In re the Application of: Claude BARLIER, ET AL. Application No.: 10/530,504 Filing Date: April 6, 2005 For: MECHANICAL COMPONENT HAVING AT LEAST ONE FLUID TRANSPORT CIRCUIT AND METHOD FOR DESIGNING SAME IN STRATA Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Sir Transmitted herewith is an Amendment for the above-identified application. Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has previously been established. A "Request for Continued Examination (RCE) Transmittal" is enclosed. Also enclosed is the fee (\$405.00) required for filling this Request under 37 C.F.R. §1.17(e). [X] [X] No additional fee for claims is required. OTHER THAN (Co1. 1) (Co]. 2) (Co1. 3)SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST NO. AFTER PREVIOUSLY PRESENT ADDITIONAL. <u>Or</u> ADDITIONAL AMENDMENT PAID FOR EXTRA FEE FEE TOTAL 25 MINUS 44 Ô 26 - \$ x 52 ≈ \$ MINUS ٥ 110 = \$ \times 220 = \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM + 195 = \$ + 390 = \$TOTAL = \$ <u>OR</u> TOTAL = \$It is hereby petitioned for an extension of time in accordance with 37 C.F.R. §1.136(a). The [X] appropriate fee required by 37 C.F.R. §1.17 is calculated as shown below. Small Entity Other than Small Entity Response filed within: Response filed within: [] first - \$ 65,00 first \$ 130.00 f 1 second \$245.00 second \$ 490.00 [X] third \$555.00 \$1,110.00 third [] fourth - \$865.00 [] fourth - \$1,730.00 month after time period set month after time period set Please charge my Deposit Account No. 03-2405 in the amount of \$ 960.00 . [X] [] A check in the amount of \$ _ is attached. [X] The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 03-2405. A duplicate copy of this sheet is attached. [X] Any filing fees under 37 C.F.R. §1.16 for the presentation of extra claims. [X] Any patent application processing fees under 37 C.F.R. §1.17. September 28, 2010 (date) COHEN, ESQ. GARY No. 28,834 Attorney for Applicants

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